

Docket No.: E7900.2005/P2005
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Ralf Kuhner et al.

Application No.: 10/578,579

Confirmation No.: 2113

Filed: May 3, 2006

Art Unit: 2832

For: CONTROL DEVICE FOR CONTROLLING
ELECTROMEDICAL APPLIANCES

Examiner: Michael A. Freidhofer

**SUBMISSION OF REVOCATION OF PRIOR POWER OF ATTORNEY AND
APPOINTMENT OF NEW ATTORNEY AND STATEMENT UNDER 37 CFR 3.73(b)**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is a Revocation of Prior Power of Attorney and Appointment of New Attorney and Statement Under 37 CFR 3.73(b) in relation to the above-captioned matter. In addition, please change the Attorney Docket Number for all correspondence associated with this application to Attorney Docket Number E7900.2005/P2005.

Dated: September 25, 2007

Respectfully submitted,

By 

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REVOCATION OF PRIOR POWER OF ATTORNEY AND APPOINTMENT OF NEW ATTORNEY	Application Number	10/578,579
	Filing Date	May 3, 2006
	First Named Inventor	Ralf Kuhner
	Title	CONTROL DEVICE FOR CONTROLLING ELECTROMEDICAL APPLIANCES
	Group Art Unit	2832
	Examiner Name	Michael A. Friedhofer
	Attorney Docket No.	E7900.0001

I hereby revoke all powers of attorney previously granted and hereby appoint:

☒ Practitioners at Customer Number →
Customer Number Customer Number Bar Code

☐ Practitioner(s) named below:

Name	Registration Number	Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.
OR

☒ Practitioners at Customer Number →
OR Customer Number Customer Number Bar Code

☐ Firm or Individual Name Gianni Minutoli
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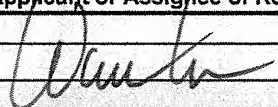
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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Christian Erbe
Signature	
Date	07/02/07

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below*.

☐ *Total of 1 forms are submitted.